

Medical Care Advisory Committee (MCAC)

Monday, November 16, 2020

10:00 – 11:00 am

MINUTES

Members Present: Lisa Adams, Kathy Bates, Sai Cherala, Lisa DiMartino, Tamme Dustin, Ellen Keith, Peter Marshall, Paula Minnehan, Kara Nickulas, Ken Norton, Ronnieann Rakoski, Marie Ramas MD, Bill Rider, Nancy Rollins, Karen Rosenberg, Jonathan Routhier, Mel Spierer, Holly Stevens, Carolyn Virtue, Michelle Winchester, Heather Young

Excused: Kristine Stoddard, Sarah Morrison

DHHS: Henry Lipman, Alyssa Cohen, Sarah Finne DMD, Dawn Landry, Wendi Aultman, Brian Clark, Doug Osterhoudt

Guests: Nichole St. Hilaire, Isaiah Anderson, Deb Fournier, Carol Iacopino, Rich Segal

Review/Approval, Carolyn Virtue, Chair

October 5, 2020 minutes: M/S/A

Rule: He-E 804, Nursing Assistant Training Reimbursement, Wendi Aultman, BEAS

He-E 804 will be amended per HB 578, requiring Medicaid to reimburse expenses incurred by licensed nursing assistants taking the Board of Nursing-approved nursing assistant training course and competency exam, who then become employed at licensed NH nursing facilities. The rule will be filed Nov 19. As suggested, the term, “licensed nursing assistant” will be substituted for “nursing assistant” to align with licensing terminology.

Department Updates, Henry Lipman, Medicaid Director

Public Health Emergency (PHE)

- **Enrollment/eligibility redeterminations:** as of 11/9/2020,

Total Medicaid: 205,370 individuals enrolled, an increase of 15.3% since the start of the PHE

Granite Advantage: 65,309, an increase of 26.6%

Standard Medicaid: 140,061, an increase of 10.7%

Numbers are doubling now week over week. This increase may be related to ACA Open Enrollment, as the Marketplace refers eligible individuals to Medicaid if they meet eligibility requirements.

The Department is continuing to conduct redeterminations and send notices to individuals with missing information. No one is being dropped from Medicaid during the PHE for failure to submit requested information unless they meet specific exceptions allowed by CMS. The Department will work with stakeholder groups to try to reach out to individuals who need to submit their information in advance of the end of the PHE in an effort to make sure people are aware of their status, and that individuals eligible for Medicaid remain on the program once the PHE ends. Chris Santaniello is working on a stakeholder outreach plan that will be shared with the MCAC.

There has been limited guidance from CMS on the unwinding process re: eligibility once the PHE ends. Guidance is available regarding the transfer of individuals within eligibility groups, but the state cannot move individuals to a lesser benefit group. There has been no action taken on moving individuals, pending a fuller understanding of the federal policy.

It was suggested that FQHCs be included in stakeholder outreach. Information was requested on the distribution of the 30,000 Medicaid providers accepting new patients. The Department is aware that access is an issue for some providers, e.g. private duty nursing (PDN), and Medicaid is working with stakeholders to address the problem.

- **COVID Vaccine:** Public Health is responsible for the rollout of the vaccine. The vaccine is not covered for the Medicaid testing and family planning groups. Flexibilities, e.g. no copays, will be in place during the remainder of the PHE.

Questions and comments for Public Health. Sai Cherala will provide information at the next meeting:

- How will information be disseminated on accessing the vaccine?
- How will people be persuaded to return for the second vaccination?
- Is there a plan to address anti-vaccination groups?
- Need to provide information in several languages, especially for marginalized and at-risk groups.
- Use plain language that will be understood by all groups including individuals with developmental disabilities.
- Communication with the public must be ongoing.
- Be mindful of mistrust and reluctance to get vaccinated among immigrants and communities of color. Employ relationships with grassroots groups, churches, and community representatives.

The NH Hospital Chief Medical Officer is working with various groups to ensure the accuracy of information. CMHCs' electronic health records will include prompts to track and encourage patients to get vaccinated.

FY 2022/2023 Agency Budget. No update is available at this time.

Telehealth Rule: Work is ongoing and the draft rule is currently under internal review.

Non-Emergency Medical Transportation (NEMT): MCO re-contracting on NEMT is under way. Members are asked to share feedback on NEMT with the Department, which meets weekly with transportation providers. The updated side-by-side NEMT guide includes broker escalation phone numbers for providers and care managers to immediately call on behalf of a member when a ride does not show on time or an urgent issue arises during a trip. *Emailed to MCAC 11/17/20.*

MCM Update Amendment #5: Effective January 1. The Department is working with actuaries on rates. The state had previously negotiated the opportunity to review rates due to COVID.

Private Duty Nursing (PDN)

PDN services for children with special health care needs has been challenging. The 1135 waiver allows personal care services to be provided by those legally responsible (due to the workforce shortage). The Department is working with CMS to offer similar flexibility for PDN services to address the gap in available hours. This should provide relief to families who are short on nursing hours. MCOs are working on this as well.

Nursing utilization is under review. Need flexibilities with CMS and licensing, for example, to allow families to hire a nurse directly rather than through an agency.

MEAD

The Department is working with Legal Assistance and CMS on MEAD. An emergency rule was adopted. More work will be done on issues raised, e.g. redeterminations.

DME

The Department is working with DME providers re: MCO payment rates. Progress has been made on DME pricing and the any willing provider issue.

Agenda Items for December 14, 2020: public health emergency – eligibility and vaccines; telehealth; agency budget; Medicaid spending by category; MCM amendment; disability determinations; private duty nursing; DHHS website redesign; mask letter; membership committee, rules committees, committees with MCAC representation.

Adjourn: M/S/A